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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875										Application or Docket Number			
	<i>F</i>	APPLICATION (Co		- PART I (Column 2)		SMALL ENTITY		OR	OTHER THAN SMALL ENTITY				
	FOR	NUM	NUMBER FILED		NUMBER EXTRA		ATE (\$)	FEE (\$)]	RATE (\$)	FEE (\$)	1	
BASIC FEE (37 CFR 1.16(a), (b), or (c))		(c))						, ()	1	10112 (0)	1	1	
SEARCH FEE (37 CFR 1.16(k), (i), or (m))									1			1	
EXAMINATION FEE					_				1			1	
(37 CFR 1.16(o), (p), or (q)) TOTAL CLAIMS		(q))		_		-			┨			┨	
(37 CFR 1.16(i)) INDEPENDENT CLAIMS		ums .	minus 2	0 = *		×	=	ļ	OR	x =	ļ	┨	
(37 CFR 1.16(h))			minus		1100	х	=		1	x =		1	
FEE	PLICATION SIZE E CFR 1.16(s))	sheets of is \$250 (f paper, t \$125 for al 50 shee	n and drawings on application sommel entity) for ets or fraction the ()(G) and 37 CF	ize fee due each ereof. See								
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))													
* If the difference in column 1 is less than zero, enter "0" in column 2.							OTAL]	TOTAL]	
APPLICATION AS AMENDED – PART II													
(Column 1) (Column 2) (Column 3)							SMALL ENTITY			OTHER THAN SMALL ENTITY			
AMENDMENT A	10/105	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA	TE (\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)		
	Total (37 CFR 1.16(i))	: 30	Minus	" 44	=	×	=	· · · · · · · · · · · · · · · · · · ·	OR	x =		1	
	Independent (37 CFR 1.16(h))	. 7	Minus	3	=	×	=		OR	x =	2/20	1	
	Application Size Fee (37 CFR 1.16(s))								1 08	<u> </u>		1	
⋖	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			1	
						TOT ADD	AL 'L FEE		OR	TOTAL ADD'L FEE	2000	J K	
	(Column 1) (Column 2) (Column 3)												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA	TE (\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)		
	Total (37 CFR 1.16(i))	•	Minus	**	5	×	=		OR	x =]	
	Independent (37 CFR 1.16(h))	*	Minus	***	=	×	=	-]	x =		1	
	Application Size Fee (37 CFR 1.16(s))					Ë			OR			1	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR				
						TOT.	AL 'L FEE		OR	TOTAL ADD'L FEE		1	
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".												

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

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